



March 24, 2009

The Honorable Bill Lockyer
California State Treasurer
915 Capitol Mall, Suite 110
Sacramento, CA 95814

Michael C. Genest, Director
California Department of Finance
State Capitol, Room 1145
Sacramento, CA 95814

Re: Retain the Adult Denti-Cal Program

Dear Treasurer Lockyer and Director Genest:

The California Primary Care Association implores you to pull the “trigger,” and find all the necessary funds to save Medi-Cal optional benefits.

California Primary Care Association (CPCA) is the statewide leader and recognized voice representing the interests of California community clinics and health centers and their patients. CPCA represents more than 600 not-for-profit community clinics and health centers (CCHCs) who provide comprehensive, quality health care services, particularly for low-income, uninsured and underserved Californians, who might otherwise not have access to health care.

All of our dental and medical providers would argue that the items deemed optional benefits – dental, optometry, podiatry, and psychology services – are not optional but an integral part of primary health care.

Statewide, clinics rely on the Medi-Cal adult dental program for an average of 40 percent of their full dental programs. Medi-Cal adults generate over \$56 million a year for clinics and constitute the primary payer source from which they provide all dental services. If the trigger is not pulled on adult dental, clinics will be faced with the very real possibility of having to terminate their dental programs – and for some their entire clinic. This means people will be diverted to costly hospital emergency rooms for even minor dental problems – which has happened in other states. Attached are the results of a survey of CPCA’s membership on the consequences of the elimination of the adult Denti-Cal program on California’s CCHCs and their patients.

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At least two non-governmental organizations have published their own analysis of the federal funds available to California, and have concluded that the \$10 billion required to turn on the trigger is available. Therefore, on behalf of the millions of Californians receiving adult Denti-Cal and the 256 clinics providing dental services to Denti-Cal patients, we implore you to use methodologies that maximize all federal funds available to achieve the true intent of the Legislature.

Though it is Legislators and not the Treasurer or the Department of Finance that are responsible for the status of adult Denti-Cal, as elected and appointed officials, you are still accountable to the people of California. We sincerely hope that you will find the political will to maintain the physical and economic health of California by finding the necessary funds to retain Medi-Cal optional benefits.

Sincerely,

A handwritten signature in dark ink, reading "Carmela Castellano-Garcia".

Carmela Castellano-Garcia
President and Chief Executive Officer
California Primary Care Association



The Impact of the Proposed Elimination of Medi-Cal Adult Dental Services on the Clinic Safety Net

Not-for-profit community clinics and health centers share a common mission to serve everyone who walks through their door, regardless of their ability to pay. In many California counties, they are responsible for providing a significant proportion of comprehensive primary care services to those who are publicly subsidized or uninsured. In 2007, 256 primary care clinic sites provided dental services to Medi-Cal Beneficiaries. For these clinics, funding from the Denti-Cal program for both children and adults is vital.

CPCA surveyed over 70 community clinics and health centers across the state to illuminate the impact of the proposed elimination of Medi-Cal reimbursement for adult dental services. These clinics represent a cross-section of those providing dental services as part of California's safety net, including sites in both rural and urban communities. According to the survey:

- Community clinics and health centers (CCHCs) provide approximately 1.1 million dental encounters to Medi-Cal beneficiaries.
- Thirty-seven percent of these dental visits (or approximately 407,000 visits) are adults.
- CCHCs will lose approximately \$56.5 million in Medi-Cal revenue.

While the elimination of adult benefits will purportedly save money in the state budget, the costs to patient health and the stability of the safety net far outweigh any potential savings. In particular, clinics report that the elimination of adult dental will result in the following consequences:

Eliminations to adult dental will result in the elimination of clinics' entire dental programs.

Community clinics and health centers rely heavily on Medi-Cal funding. An overwhelming majority of clinics reported that the proposed elimination would devastate their entire dental program. "Our clinic would have to close and we could not offer any more services to any other populations. Our financial viability depends on Medi-Cal reimbursements for services provided to adults." According to another clinic, "The fees from our adult Medi-Cal patients are more than 50% of our dental patient fees. Without this reimbursement, we could not offer [dental] service[s] to our sliding scale, CMSP and Healthy Families clients." Not only will Medi-Cal beneficiaries be affected, but other patients that rely on the clinics for dental services will be as well.

Rural areas will suffer disproportionately from the elimination of adult dental. In rural areas, providers are limited, and dental providers serving Medi-Cal patients are especially scarce. Some clinics report that without their dental clinic, patients would have to endure 50-60 mile trips to secure dental services. One clinic in a rural area commented, "We are the only dental provider in an area larger than Rhode Island - closing our dental clinic would remove all access to dental care for the rural communities that we serve."

The elimination of Medi-Cal fund for adult dental would result in reductions in services, layoffs of staff and longer wait times. Since clinics rely so heavily on Medi-Cal, any reductions to these funds will drastically affect their whole dental program operations. One clinic shared,



“We would lose 1 full time dentist, 3 part time dentists, 3 RDAs and 1 receptionist. We would have much longer wait times to get an appointment.”

Reducing such critical Medi-Cal services as adult dental will only exacerbate overall health conditions for the population with the greatest need for dental services, and those most vulnerable to oral health complications, and result in severe damage to the safety net.

For more information on the California’s community clinics and health centers and dental, please contact Jamila Iris Edwards at jedwards@cpca.org or (916) 440-8170 x.234.